

BIRTH PLANNING ATTITUDES
AND THE ARMY CHAPLAIN

Writing Requirement
C-22 Course
U. S. Army Chaplain School

Target Journal
Family Planning Perspectives

Richard A. George
Chaplain (MAJ) U.S.A.
11 May 1973

PREFACE

Acknowledgement is gratefully made for assistance in research by the staff of Planned Parenthood Federation in New York City. Particularly helpful was the Director of Research of Planned Parenthood - World Population, Dr. Eleanor Snyder.

Acknowledgement is also made of the Chaplains who cooperated in the survey of chaplain attitudes which was done in December 1972.

TABLE OF CONTENTS

Chapter

<p>I. SIGNIFICANT ATTITUDE CHANGES HAVE RECENTLY OCCURED IN AMERICAN SOCIETY CONCERNING BIRTH PLANNING</p> <p style="padding-left: 40px;">Introduction</p> <p style="padding-left: 40px;">Rejection of Restrictive Legislation Concerning Legal Abortion</p> <p style="padding-left: 40px;">Rejection of "Abortion Mentality" Which is Affirmed by Institutions</p> <p style="padding-left: 40px;">Decision of The U. S. Supreme Court Defining Abortion</p> <p style="padding-left: 40px;">Assumption of Responsibility for Creating One's Future.</p> <p>II. THIS CHANGE IN ATTITUDE EFFECTS THE ROLES OF PERSONS WHO HAVE TRADITIONALLY COUNSELED CONCERNING BIRTH PLANNING</p> <p style="padding-left: 40px;">The Hospital Committee</p> <p style="padding-left: 40px;">The Physician</p> <p style="padding-left: 40px;">The Clergyman</p> <p>III. AN ATTITUDE SURVEY OF MILITARY PERSONNEL INCLUDING CHAPLAINS INDICATES THAT AREAS OF POSSIBLE CONFLICT EXIST</p> <p style="padding-left: 40px;">Right to Birth Planning</p> <p style="padding-left: 40px;">Birth Planning Decisions</p> <p style="padding-left: 40px;">Alternate Life Style</p> <p style="padding-left: 40px;">Legislation</p> <p style="padding-left: 40px;">Counseling</p> <p>IV. POSSIBLE ADAPTION OF CHAPLAINS TO THE CHANGING ATTITUDES IN BIRTH PLANNING</p> <p style="padding-left: 40px;">Identification and Appreciation of Changes That Have and Are Occurring</p> <p style="padding-left: 40px;">Determination of Why and When Counseling Is Needed</p> <p style="padding-left: 40px;">Determine Criterion for Successful Counseling</p> <p style="padding-left: 40px;">Identification and Training of the Skills, Knowledge and Attitudes Necessary for Successful Counseling</p>	<p>1</p> <p>6</p> <p>9</p> <p>25</p>
<p style="padding-left: 40px;">Question 5, 6, 7</p> <p style="padding-left: 40px;">Question 8, 9, 10, 11</p> <p style="padding-left: 40px;">Question 14</p> <p style="padding-left: 40px;">Question 17, 19, 20</p> <p style="padding-left: 40px;">Question 21</p>	<p></p>

LIST OF TABLES

Table		Page
1.	1972 Gallop Finding on Abortion	3
2.	Question 5: Attitude Survey on Right to Birth Planning	10
3.	Question 6: Attitude Survey on Right to Birth Planning	11
4.	Question 7: Attitude Survey on Right to Birth Planning	12
5.	Question 8: Attitude Survey on Birth Planning Decisions	14
6.	Question 9: Attitude Survey on Birth Planning Decisions	15
7.	Question 10: Attitude Survey on Birth Planning Decisions	16
8.	Question 11: Attitude Survey on Birth Planning Decisions	16
9.	Question 14: Alternative Life Styles	18
10.	Question 17: Attitude Survey on Restrictive Legislation	20
11.	Question 19: Attitude Survey on Restrictive Legislation	21
12.	Question 20: Attitude Survey on Restrictive Legislation	22
13.	Question 21: Attitude Survey on Counseling . . .	24

CHAPTER I

SIGNIFICANT ATTITUDE CHANGES HAVE RECENTLY OCCURRED IN AMERICAN SOCIETY CONCERNING BIRTH PLANNING

Professional attitude surveys conducted from 1965 through 1972 indicate that significant changes have occurred in American society concerning birth planning. The purpose of this paper is to contrast these findings with a similar study of Army chaplains and other military personnel. The contrast will identify differences in attitudes which exist as areas of conflict in the chaplain relationships.

Evaluating the words and positions of extremist leaders in abortion reforms, the image is created of two opposing forces about to engage in all out war.

Evidence indicating a shift in attitude is in the last five years one-third of all the states have had new abortion laws and almost all states have considered legislation in this area.

However, the evidence from surveys which measure attitudes suggest a growing consensus and not polarization in regard to abortion reform.

The 1972 Gallup survey which is the latest published survey nationally sampled indicated that among the variables measured, education is the most highly associated with support

for reforms. While differences between Roman Catholic and Protestant still persist they are statistically minor when compared to factors such as education, income, age, and region. Although many people do not like abortion reforms they are willing to support the availability of these services for those who need them.

Table 1. Percent Response in June 1972 to the Statement: "As You May Have Heard, in the Last Few Years a Number of States Have Liberalized Their Abortion Laws. To What Extent Do You Agree or Disagree with the Following Statement Regarding Abortion: The Decision to Have an Abortion Should Be Made Solely by a Woman and Her Doctor?"

Response	Total Agree	Strongly Agree	Agree	Total Disagree	Disagree	Strongly Disagree	Don't Know	Number interviewed
Total	64	29	35	31	18	13	5	1,574
Men	63	28	35	32	20	12	5	758
Women	64	30	34	31	17	14	5	808
18-29	65	32	33	31	20	11	5	399
30-39	62	27	35	34	19	15	4	258
40-49	65	32	33	32	21	11	4	281
50+	63	27	36	31	18	15	7	599
Not High School Graduate	50	21	29	43	24	19	7	451
High School Graduate	70	28	42	26	15	11	4	872
College	74	44	30	22	14	8	4	242
Protestant	55	28	37	31	19	12	4	950
Catholic	56	24	32	39	19	20	5	430
Republican	58	28	40	27	17	10	5	357
Democrat	59	25	33	36	21	15	4	716
Independent	57	35	32	28	18	12	5	458
< \$5,000	63	22	31	38	23	15	8	320
\$5,000-6,999	55	26	29	40	21	19	5	238
\$7,000-9,999	71	31	40	26	14	12	3	251
\$10,000-14,999	68	30	38	27	15	12	5	400
\$15,000+	74	40	34	24	17	7	2	328
East	69	34	35	28	14	14	3	458
Midwest	62	27	35	34	22	12	4	438
South	54	25	29	39	24	15	7	421
West	73	32	41	21	10	11	6	267
White	65	30	35	31	18	13	4	1,438
Black	62	20	32	38	22	18	11	124
0-2 Children	67	31	36	27	16	12	6	760
3 Children	64	28	36	28	17	11	7	235
4+ Children	55	24	31	43	23	20	2	329

The institutions that have opposed abortion believe that the fetus is a person from the moment of conception and therefore abortion is murder. A further legitimization has developed from institutions which oppose abortion which has been labeled "The Abortion Mentality" by Sarvis and Rodman. Even though this legitimization evokes powerful emotional appeal, its influence was minimal during the New York State Debate in 1972 and was found to be diminishing.

Clashing attitudes and ideologies in the abortion controversy have produced some interesting phenomena; one of them is the idea of an "abortion mentality." A literal reading of what has been said about abortion might lead one to conclude that the abortion mentality is a dangerous communicable disease--one that spreads throughout a country once the abortion laws have been liberalized, and sometimes even before. Three symptoms of this disease can be recognized: a (dangerous) increase in the abortion rate; a (dangerous) decrease in the amount of guilt over abortions; and a (dangerous) growth of disrespect for life.

The change in attitude of the American people is further indicated by the ruling of the Supreme Court on 22 January 1973. In this decision the court declared a restrictive abortion law unconstitutional.

The Court ruled that a state could not intervene in the abortion decision between a woman and her physician during the first three months of pregnancy. During the second trimester, when abortion is more hazardous, the state's interest in the health of the woman permits the enactment of regulations to protect maternal health, such as statutes specifying where abortions may or may not be performed. Beyond such procedural requirements, however, the decision is still the woman's and her physician's. After the fetus has reached the stage of

¹Betty Sarvis and Hyman Rodman, The Abortion Controversy (New York and London: Columbia University Press, 1973), p. 152.

viability, corresponding to approximately the last three months of pregnancy, the state can exercise an interest in promoting potential human life. It may do so by prohibiting abortion except when it is necessary to preserve the life or health of the mother. Although the Court did not accept the pro-abortionist position that a woman has an absolute right to an abortion, regardless of circumstances, its judgment nevertheless renders all original and reform laws unconstitutional, and makes abortion far more available throughout the United States.²

Perhaps the subtle and important change is that people today are living in a secular age where their future is created by planning. Not to plan one's future is the ultimate of irresponsible ethical action. Assuming responsibility for one's life is part of being a person in today's world.

²ibid., p. 68.

CHAPTER II

THIS CHANGE IN ATTITUDE EFFECTS THE ROLES OF PERSONS WHO HAVE TRADITIONALLY COUNSELED CONCERNING BIRTH PLANNING

The change in attitude effects the rules that the helping and healing profession have traditionally held concerning birth planning. Under reform legislation the decision to perform an abortion was made by a committee at the local hospital. The physician would present the case to the committee and seek their concurrence. Responsibility was shared by the physicians on the committee and the patient was excluded from the decision making process. This whole process has now been rejected by the Supreme Court decision of 22 January 1972.⁶

A more traditional approach was the decision made by the individual physician. As the law often indicated, the health of the woman was a factor, information received by the physician was often distorted in order to secure the desired medical procedure. Physicians often also engaged in this distortion of information in order to obtain the desired result as reported by Sarvis and Rodman.

Some psychiatrists have used this information to engage women in a game of Catch 22. According to reform law, a healthy woman is not entitled to an abortion -- a woman must show serious signs of mental illness in order to qualify for an abortion. But according to the

psychiatrist, only a healthy woman can adjust readily to the abortion experience--a mentally ill woman will not be able to make that adaptation. The result, of course, is that no woman is able to qualify.³

In the new situation as defined by the Supreme Court decision the physician's role in deciding who obtains an abortion radically changes. No longer is he required to play God for his patient but offers a technical service that the patient may desire.

Meyerowitz and Romano suggest that the obligation of a physician is to look beyond "the face value of the demand"⁴ and assist the patient in resolving mixed feelings which underlie the request and can be resolved with a physician's help.

The role of the clergyman in birth planning counseling to my knowledge has never been surveyed. However, question 21 of the Chaplain's Attitude Survey will indicate how chaplains would approach this situation.

As clergy are often identified with judgemental institutions it would seem that people who seek their counsel in birth planning would often know the answer and counsel that they would be likely to obtain and those who seek counsel would do so to confirm decisions they had already made.

However, other clergymen have been actively involved in referral services for making available abortion services.

³ibid., p. 123.

⁴Sanford Meyerowitz and John Romano, "Who May Not Have an Abortion," Journal of the American Medical Association, Vol. 209, (July 14, 1969), 260.

People seeking their counsel would do so for a different set of reasons.

As most clergymen are between these extremes it is likely they will be "sounded out" by potential counselees to determine their attitude concerning birth planning prior to requests for counseling.

CHAPTER III

AN ATTITUDE SURVEY OF MILITARY PERSONNEL INCLUDING CHAPLAINS INDICATES THAT AREAS OF POSSIBLE CONFLICT EXIST

On 14 December 1972 a survey was made of a number of Army chaplains attending the career course. Some of the questions asked had been used by other researchers which provided stratified and national norms. Because of statistical sampling limitations, the study at USACHS must be considered only a feasibility study. However, within the statistical limitations it indicates some definite contrast between attitude of chaplains and specific groups within the military community and American society.

Questions 5, 6, and 7 are an attempt to measure the "Right to Birth Planning" of chaplains in contrast to other groups. The results indicate that the WAC and Catholic chaplains represent the extremes in position. Catholic laymen have a closer correlation to the national norms than they do to their chaplains. Protestant chaplains tend to closely represent the national norms in this area although tending to be more conservative.

QUESTION 5:

HOW DO YOU FEEL ABOUT MAKING CONTRACEPTIVES AVAILABLE TO UNMARRIED PERSONS OVER EIGHTEEN YEARS OLD?

() = Percentage

	TOTAL	WOMAN'S ARMY CORPS	PROTESTANT CHAPLAINS WIVES	PROTESTANT CHAPLAINS	TOTAL CHAPLAINS	CATHOLIC CHAPLAINS	CATHOLIC LAYMEN	NATIONAL NORM
SAMPLE SIZE	72 (100)	10 (14)	10 (14)	32 (44)	42 (58)	10 (14)	10 (14)	(% only)
STRONGLY APPROVE	17 (23.6)	6 (60)	1 (10)	5 (15.6)	5 (11.9)		5 (50)	35%
APPROVE	23 (31.9)	3 (30)	4 (40)	14 (43.8)	14 (33.3)		2 (20)	36%
STRONGLY DIS APPROVE	10 (13.9)		1 (10)	2 (6.2)	8 (19.1)	6 (60)	1 (10)	9%
DISAPPROVE	13 (18.1)	1 (10)	1 (10)	7 (21.9)	10 (23.8)	3 (30)	1 (10)	13%
NO OPINION	9 (12.5)		3 (30)	4 (12.5)	5 (11.9)	1 (10)	1 (10)	7%
	(100%)	(100%)	(100%)	(100%)	(100%)	(100%)	(100%)	(100%)

QUESTION 6:

HOW DO YOU FEEL ABOUT MAKING CONTRACEPTIVES AVAILABLE TO UNMARRIED YOUNG PEOPLE UNDER 18 YEARS OLD?
WOULD YOU SAY THAT YOU:

() - Percentages

	TOTAL	WOMAN'S ARMY CORPS	PROTESTANT CHAPLAINS' WIVES	PROTESTANT CHAPLAINS	TOTAL CHAPLAINS	CATHOLIC CHAPLAINS	CATHOLIC LAYMEN	NATIONAL NORM (% only)
SAMPLE SIZE	72 (100)	10 (14)	10 (14)	32 (44)	42 (58)	10 (14)	10 (14)	
STRONGLY APPROVE	12 (16.7)	5 (50)	1 (10)	3 (9.4)	3 (7.1)		3 (30)	20 %
APPROVE	17 (23.6)	2 (20)	1 (10)	11 (34.4)	11 (26.2)		3 (30)	29 %
STRONGLY DISAPPROVE	20 (27.8)	2 (20)	3 (30)	6 (18.7)	13 (31)	7 (70)	2 (20)	19 %
DISAPPROVE	17 (23.6)		5 (50)	8 (25)	11 (26.2)	3 (30)	1 (10)	24 %
NO OPINION	6 (8.3)	1 (10)		4 (12.5)	4 (9.5)		1 (10)	8 %
	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100 %)

QUESTION 7:

IF YOU HAD AN UNMARRIED TEENAGE DAUGHTER, WOULD YOU HELP HER TO GET CONTRACEPTIVES?

SAMPLE SIZE	TOTAL	WOMAN'S					() - Percentages			
		ARMY CORPS	PROTESTANT CHAPLAINS' WIVES	PROTESTANT CHAPLAINS	TOTAL CHAPLAINS	CATHOLIC CHAPLAINS	CATHOLIC LAYMEN	NATIONAL WOMEN (% only)		
YES	72 (100)	10 (14)	10 (14)	32 (44)	42 (58)	10 (14)	10 (14)	46 %	3 (30)	10 (14)
NO	15 (20.8)	5 (50)	2 (20)	5 (15.6)	5 (11.9)			42 %	3 (30)	3 (30)
MAYBE	37 (51.4)	2 (20)	4 (40)	18 (56.3)	28 (66.7)	10 (100)	3 (30)	1 %	4 (40)	4 (40)
NO OPINION	20 (27.8)	3 (30)	4 (40)	9 (28.1)	9 (21.4)			11 %		
	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100 %)	(100)	(100)

Questions 8, 9, 10, and 11 attempt to measure who should make birth planning decisions. The survey suggests that WAC personnel expect to make this decision alone (50%) or with their doctor (30%) or with their husbands (20%). The Protestant chaplains favor decision making with the husband (43%) by the woman and doctor (31%) and only (6%) favor the decision being made by the woman alone. The Catholic chaplains deny the right to make the decision (90%) except when the life of the mother is in danger (10%). The Catholic laymen are closer to the national norm than they are to any group of chaplains. The WAC personnel are twice as likely to report termination of an unplanned pregnancy than the national norm. The Protestant chaplain and Catholic layman are close to the national norm in the degree of acceptability of an abortion.

QUESTION 8:

TODAY IN NEW YORK STATE, A WOMAN CAN OBTAIN AN ABORTION AT HER REQUEST. WHICH OF THE FOLLOWING DO YOU AGREE WITH:

THE DECISION OF HAVING AN ABORTION SHOULD BE MADE BY:

	TOTAL	WOMAN'S			TOTAL	CATHOLIC CHAPLAINS	CATHOLIC LAYMEN	NATIONAL NORM (% only)
		ARMY CORPS	PROTESTANT CHAPLAINS' WIVES	PROTESTANT CHAPLAINS				
SAMPLE SIZE	72 (100)	10 (14)	10 (14)	32 (44)	42 (58)	10 (14)	10 (14)	
BY THE WOMAN ALONE	9 (12.5)	5 (50)	1 (10)	2 (6.3)	2 (4.8)		1 (10)	20 %
BY THE WOMAN AND HER DOCTOR	18 (25)	3 (30)	3 (30)	10 (31.3)	10 (23.8)		2 (20)	15 %
BY THE WOMAN AND HER HUSBAND	24 (33.3)	2 (20)	4 (40)	14 (43.7)	14 (33.3)		4 (40)	33 %
BY THE WOMAN, HER HUSBAND, AND HER DOCTOR								2 %
ONLY WHEN THE MOTHER'S LIFE IS IN DANGER	9 (12.5)		2 (20)	5 (15.6)	6 (14.3)	1 (10)	1 (10)	22 %
SHOULD NOT BE PERMITTED IN ANY CIRCUMSTANCE	12 (16.7)			1 (3.1)	10 (23.8)	9 (90)	2 (20)	8 %
	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100 %)

QUESTION 9:

DO YOU THINK THAT AN UNMARRIED TEENAGER SHOULD BE ABLE TO GET AN ABORTION WITHOUT HER PARENTS' CONSENT?

() - Percentage

SAMPLE SIZE	TOTAL	WOMAN'S ARMY CORPS	PROTESTANT CHAPLAINS' WIVES	PROTESTANT CHAPLAINS	TOTAL CHAPLAINS	CATHOLIC CHAPLAINS	CATHOLIC LAYMEN	NATIONAL NORM (% only)
	72 (100)	10 (14)	10 (14)	32 (44)	42 (58)	10 (14)	10 (14)	
YES	18 (25)	5 (50)	1 (10)	7 (21.9)	7 (16.6)		5 (50)	37 %
NO	41 (56.9)	3 (30)	7 (70)	16 (50)	26 (62)	10 (100)	5 (50)	57 %
MAYBE	11 (15.3)	2 (20)	2 (20)	7 (21.9)	7 (16.6)			1 %
NO OPINION	2 (2.8)			2 (6.2)	2 (4.8)			5 %
	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100 %)

QUESTIONS 10 & 11:

10 asked of men: IF YOUR WIFE (OR GIRL FRIEND) HAS AN UNWANTED PREGNANCY WHICH OF THE FOLLOWING WOULD YOU WANT HER TO DO?

11 asked of women: IF YOU HAD AN UNWANTED PREGNANCY, WHICH OF THE FOLLOWING WOULD YOU BE MOST LIKELY TO DO?

() = Percentages

	TOTAL	WOMAN'S ARMY CORPS	PROTESTANT CHAPLAINS' WIVES	PROTESTANT CHAPLAINS	TOTAL CHAPLAINS	CATHOLIC CHAPLAINS	CATHOLIC LAYMEN	NATIONAL NORM (% only)
SAMPLE SIZE	72 (100)	10 (14)	10 (14)	32 (44)	42 (58)	10 (14)	10 (14)	
(men) HAVE THE BABY AND RAISE HIM OR HER	24 (33.3)			10 (31.3)	20 (47.7)	10 (100)	4 (40)	
(women) HAVE THE BABY AND RAISE HIM OR HER YOURSELF	8 (11.1)	2 (20)	6 (60)					48 %
HAVE THE BABY AND GIVE HIM OR HER UP FOR ADOPTION	13 (18.1)		1 (10)	11 (34.3)	11 (26.2)		1 (10)	7 %
TERMINATE THE PREGNANCY WITH AN ABORTION	22 (30.5)	7 (70)	2 (20)	10 (31.3)	10 (23.8)		3 (30)	34 %
NO OPINION	5 (7)	1 (10)	1 (10)	1 (3.1)	1 (2.3)		2 (20)	11 %
	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100 %)

Question 14 is an attempt to measure acceptance of alternate life styles for women as alternatives to traditional roles. The WAC personnel indicate the highest sense of acceptance and the chaplains indicated a higher sense of unacceptability than the national norm.

QUESTION 14:

FOR WOMEN TODAY, HAVING A CAREER IS AS REWARDING AS HAVING CHILDREN.
DO YOU AGREE OR DISAGREE?

() - Percentages

SAMPLE SIZE	TOTAL	WOMAN'S ARMY CORPS		PROTESTANT CHAPLAINS' WIVES		PROTESTANT CHAPLAINS		TOTAL CHAPLAINS		CATHOLIC CHAPLAINS		CATHOLIC LAYMEN		NATIONAL NORM (% only)
		10 (14)	10 (14)	10 (14)	10 (14)	32 (44)	32 (44)	42 (58)	42 (58)	10 (14)	10 (14)	10 (14)	10 (14)	
AGREE STRONGLY	11 (15.3)			1 (10)	1 (10)	8 (25)	8 (25)	8 (19)	8 (19)			2 (20)	2 (20)	22 %
AGREE SLIGHTLY	9 (12.5)	2 (20)		2 (20)	2 (20)	4 (12.5)	4 (12.5)	5 (11.9)	5 (11.9)	1 (10)				20 %
AGREE	19 (26.4)	6 (60)				8 (25)	8 (25)	10 (23.8)	10 (23.8)	2 (20)		3 (30)	3 (30)	
DISAGREE STRONGLY	11 (15.3)	1 (10)		2 (20)	2 (20)	3 (9.4)	3 (9.4)	7 (16.7)	7 (16.7)	4 (40)		1 (10)	1 (10)	33 %
DISAGREE SLIGHTLY	4 (5.6)			1 (10)	1 (10)	3 (9.4)	3 (9.4)	3 (7.1)	3 (7.1)					19 %
DISAGREE	13 (18)	1 (10)		3 (30)	3 (30)	4 (12.5)	4 (12.5)	7 (16.7)	7 (16.7)	3 (30)		2 (20)	2 (20)	
NO OPINION	5 (6.9)			1 (10)	1 (10)	2 (6.2)	2 (6.2)	2 (4.8)	2 (4.8)			2 (20)	2 (20)	6 %
	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100 %)

Questions 17, 19 and 20 attempt to measure the attitudes concerning reform legislation and birth planning. As these were made the month prior to the Supreme Court decision they do not reflect that decision.

The results suggest that the WAC personnel resent restrictive birth planning legislation while Catholic chaplains consistently support restrictive legislation. Question 17 indicates the highest correlation between the responses of the chaplains' wives and WAC personnel.

QUESTION 17:

AS YOU MAY KNOW, FOR THE LAST TWO YEARS WOMEN HAVE BEEN ABLE TO GET LEGAL MEDICAL ABORTIONS IN NEW YORK STATE. DO YOU AGREE THAT WOMEN SHOULD BE ABLE TO CONTINUE TO GET LEGAL ABORTIONS IN NEW YORK STATE UNDER THE PRESENT LAW?

() = Percentages

SAMPLE SIZE	TOTAL	WOMAN'S		PROTESTANT		PROTESTANT		TOTAL	CATHOLIC		NATIONAL
		ARMY	CORPS	CHAPLAINS'	WIVES	CHAPLAINS	CHAPLAINS		LAYMEN	NORM	
										(% only)	
YES	72 (100)	10 (14)	10 (100)	10 (14)	32 (44)	18 (56.3)	42 (58)	10 (14)	10 (14)	5 (50)	71 %
NO	39 (54.1)	10 (100)	6 (60)	1 (10)	8 (25)	18 (42.9)	18 (42.9)	10 (100)	2 (20)	29 %	
DON'T KNOW	21 (29.2)		3 (30)	6 (18.7)	6 (14.2)	3 (30)	6 (14.2)		3 (30)		
	12 (16.7)										
	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100 %)

QUESTION 19:

IN A RECENT REVERSAL OF POLICY, DOD HAS LIMITED ABORTIONS TO MILITARY PERSONNEL IN MILITARY FACILITIES ONLY TO THOSE STATES WHICH HAVE A SIMILAR LAW. HOW DO YOU FEEL ABOUT THIS CHANGE?

() = Percentages

SAMPLE SIZE	WOMAN'S ARMY CORPS		PROTESTANT CHAPLAINS' WIVES		PROTESTANT CHAPLAINS		TOTAL CHAPLAINS		CATHOLIC CHAPLAINS		CATHOLIC LAYMEN	
	TOTAL	10 (14)	10 (14)	10 (14)	32 (44)	16 (38.1)	42 (58)	10 (14)	6 (60)	3 (30)	10 (14)	10 (14)
AGREE	72 (100)	4 (40)	1 (10)	10 (14)	10 (31.3)	21 (50)	3 (7.1)	1 (10)	2 (20)	2 (20)		
DISAGREE	24 (33.3)	6 (60)	5 (50)	18 (56.3)	2 (20)	2 (4.8)						
NO OPINION	35 (48.6)	7 (9.7)	2 (20)	2 (6.2)								
DID NOT KNOW	6 (8.4)		2 (20)	2 (6.2)								
	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)	(100)

18

QUESTION 20:

IN THE TWO YEARS SINCE LEGAL ABORTION LAWS WERE PASSED IN NEW YORK STATE, WOULD YOU SAY YOUR ATTITUDE TOWARD ABORTION HAS:

() = Percentages

	WOMAN'S ARMY CORPS	PROTESTANT CHAPLAINS' WIVES	PROTESTANT CHAPLAINS	TOTAL CHAPLAINS	CATHOLIC CHAPLAINS	CATHOLIC LAYMEN
<u>TOTAL</u>	10 (14)	10 (14)	32 (44)	42 (58)	10 (14)	10 (14)
SAMPLE SIZE	72 (100)					
BECOME MORE FAVORABLE	8 (80)	2 (20)	7 (21.9)	8 (19.1)	1 (10)	3 (30)
BECOME LESS FAVORABLE	1 (10)	1 (10)	5 (15.6)	6 (14.3)	1 (10)	1 (10)
REMAINED THE SAME	1 (10)	7 (70)	20 (62.5)	28 (66.6)	8 (80)	6 (60)
	(100)	(100)	(100)	(100)	(100)	(100)

Question 21 on the survey is the most central issue of this paper. This response indicates a contrast between the expectations of a soldier seeking counsel and the pre-conditioned response of chaplains who may counsel them. A WAC seeking counsel from a Catholic chaplain will probably be in conflict with his values no matter what faith she happens to be. The response of the Catholic chaplains suggests they ignore the decision of the client, and attempt to shape her response. Only 10% of Catholic chaplains indicated that they would allow the person to make up his own mind and 20% would discuss the subject only if brought up and 70% would reject the subject if brought up. This indicates a high sense of judgement and rejection of attitude of the client. The Protestant chaplains tend to be less judgemental and less willing to make decisions for their clients.

QUESTION 21:

WHEN YOU COUNSEL PERSONS CONCERNING UNWANTED PREGNANCY, WHAT IS YOUR ATTITUDE TOWARD ABORTION?

() - Percentages

	TOTAL	WOMAN'S ARMY CORPS	PROTESTANT CHAPLAINS, WIVES	PROTESTANT CHAPLAINS	TOTAL CHAPLAINS	CATHOLIC CHAPLAINS	CATHOLIC LAYMEN
SAMPLE SIZE	72 (100)	10 (14)	10 (14)	32 (44)	42 (58)	10 (14)	10 (14)
PRESENT AS POSSIBILITY	15 (20.8)	7 (70)	1 (10)	5 (15.6)	5 (11.9)		2 (20)
DISCUSS ONLY IF THEY BRING SUBJECT UP	12 (16.7)			7 (21.9)	9 (21.4)	2 (20)	3 (30)
REJECT THE PROBLEM IF BROUGHT UP	10 (13.9)			2 (6.2)	9 (21.4)	7 (70)	1 (10)
CONSIDER ONLY AS LAST RESORT	7 (9.7)		2 (20)	4 (12.5)	4 (9.5)		1 (10)
REMAIN NEUTRAL	8 (11.1)		1 (10)	7 (21.9)	7 (16.7)		
ALLOW PERSONS TO MAKE UP OWN MIND	17 (23.6)	3 (30)	3 (30)	7 (21.9)	8 (19.1)	1 (10)	3 (30)
NO OPINION	3 (4.2)		3 (30)				
	(100)	(100)	(100)	(100)	(100)	(100)	(100)

25

CHAPTER IV

POSSIBLE ADAPTION OF CHAPLAINS TO THE CHANGING ATTITUDES IN BIRTH PLANNING

The questions raised by this survey have not been fully examined or answered. Further studies of this nature should be undertaken to identify areas of contrast between attitudes of chaplains and military personnel. These could serve as the basis for dialogue and continual discussion from chaplain and military personnel. Both need to explore and understand the position of each other.

Pastoral counseling as a discipline needs to establish a guideline which indicates why and when counseling is needed. In doing so it will need to take into account the changing rules of other counseling and all the social facts of the new situation. Indications are that the real crisis exists not in the person seeking abortion, but in society's reaction to that person. Counseling often serves to sharpen that crisis and not resolve it.

Pastoral counselors need to establish a goal for successful counseling which takes into consideration birth planning as an intentional ethical act by a responsible person. The medical model for successful counseling often sets as its goal the subsequent contraception use by the

patient. A repeater who requests a later abortion is considered a failure in counseling.

Evidence that counseling just prior to, during and following legal abortion can help prevent future unwanted pregnancies through contraceptive use has emerged from a controlled study of abortion counseling in a large county hospital in San Francisco. The study found that nine out of 10 women who received counseling accepted and continued on contraception following their abortions, while only six out of 10 of those who were not counseled even returned for postabortion checkups and contraceptive prescription.

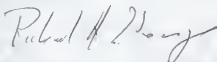
The counselor's function, therefore, was to be threefold: to provide support prior to, and during, the procedure; to educate women about the urgent necessity of medical follow-up; and to introduce them to family planning to prevent further unwanted pregnancies. Since there were few precedents for such a service, the staff believed it essential to design it so that it might be possible to evaluate its effectiveness.⁵

The counseling goal of the pastor will need to take shape in the framework of the spiritual and mental well-being of the person. Whatever the goals are they will need to recognize the responsibility of the person to exercise her right, with medical advice and counsel, to determine her child bearing options.

A further process will need to occur when the counseling models are established and accepted among clergymen. This is the identification of skills, knowledge, and attitudes necessary to perform successful counseling. Once these are known this will need to be integrated into the education and training of Army chaplains if they are to minister effect-

⁵Bonnie Dauber, Marianne Zalar and Phillip J. Goldstein, M.D., "Abortion Counseling and Behavioral Change", Family Planning Perspectives, Vol. 4, No. 2, April 1972, p. 23-27.

ively to military people. The survey would suggest a limited effectiveness in this area. However what is clear is the need for further study.



RICHARD A. GEORGE
Chaplain (Major), USA
5-16-C22-73-1
11 May 1973

BIBLIOGRAPHY

- Beauvoir, Simone de. The Second Sex. Translated and edited by H. M. Parshley. New York: Bantam, 1944.
- Bell, Robert R. Social Deviance: A Substantive Analysis. Homewood, Ill.: Dorsey, 1971.
- Bolter, Sidney, "The Psychiatrist's Role in Therapeutic Abortion: The Unwitting Accomplice". American Journal of Psychiatry, 119 (October, 1962), 312-16.
- Calderone, Mary Steichen, editor. Abortion in the United States. Proceedings of a Conference sponsored by the Planned Parenthood Federation of America, Inc. at Arden House and The New York Academy of Medicine. New York: Macmillan, 1970.
- Callahan, Daniel. Abortion: Law, Choice and Morality. New York: Macmillan, 1970.
- Dauber, Bonnie, Marianne Zalar, and Phillip J. Goldstein. "Abortion Counseling and Behavioral Change." Family Planning Perspectives, 4 (April, 1972), 23-27.
- Ekblad, Martin. "Induced Abortion on Psychiatric Grounds: A Followup Study of 479 Women." Acta Psychiatrica et Neurologica Scandinavica, Supplementum 99, 1955.
- George, B. James, Jr. "Current Abortion Laws: Proposals and Movements for Reform." David Smith, editor, Abortion and the Law, pp. 1-36, 1967.
- , "The Evolving Law of Abortion," Western Reserve Law Review, 23 (Summer, 1972), 708-55.
- Greenhouse, Linda J. "Constitutional Question: Is There a Right to Abortion?" New York Times Magazine, (January 25, 1970), pp. 30 et passim.
- , "After July 1, an Abortion Should Be as Simple to have as a Tonsillectomy, but---," New York Times Magazine, (June 28, 1970), pp. 7 et passim.
- Guttmacher, Alan F., editor. The Case for Legalized Abortion Now. Berkeley, Calif.: Diablo Press, 1967.

Guttmacher, Alan F. Birth Control and Love. New York: Macmillan, 1969.

Hall, Robert, editor. Abortion in a Changing World. 2 vols. Proceedings of an International Conference Convened in Hot Springs, Virginia, November 17-20, 1968, by the Association for the Study of Abortion. New York: Columbia University Press, 1970.

Meyerowitz, Sanford and John Romano. "Who May Not Have an Abortion," Journal of the American Medical Association, 209, (July, 1969), 260-61.

Pakter, Jean and Frieda Nelson. "Abortion in New York City: The First Nine Months," Family Planning Perspectives, 3, (July, 1971), 5-12.

Reiterman, Carl, editor. Abortion and the Unwanted Child. New York: Springer, 1971.

Sarvis, Betty and Hyman Rodman. The Abortion Controversy. New York: Columbia University Press, 1973.